## Mississippi Secretary of State

700 North Street P. O. Box 136, Jackson, MS 39205-0136

ADMINISTRATIVE PROCEDURE	S NOTICE FILING	i			
AGENCY NAME Public Employees' Retirement System		CONTACT PERSON Jane L. Mapp	TELEPHONE NUMBER 601-359-3592		
ADDRESS 429 Mississippi Street		CITY Jackson		STATE MS	ZIP 39201
EMAIL JMapp@pers.ms.gov	SUBMIT 02/26/14	Name or number of rule(s): Regulation 59			
Short explanation of rule/amendment	repeal and reason	(s) for proposing rule/amendm	ent/repeal:		
The proposed amendments to Regulati SLRP, and MHSPRS as adopted by th improved mortality for retirees over the will be July 1, 2014.	e PERS Board June	18, 2013, in conjunction with t	the Experien	ce Investigat	ion, which showed
Specific legal authority authorizing the	promulgation of re	ule: 25-11-15(6)			
List all rules repealed, amended, or su	spended by the pro	posed rule: Regulation 59			
ORAL PROCEEDING:					
An oral proceeding is scheduled fo	r this rule on Date	e:			
X Presently, an oral proceeding is not	scheduled on this ru	ıle.			
If an oral proceeding is not scheduled, an oral p ten (10) or more persons. The written request a notice of proposed rule adoption and should ind agent or attorney, the name, address, email add comment period, written submissions including	should be submitted to to clude the name, address dress, and telephone nu	he agency contact person at the above , email address, and telephone numbe mber of the party or parties you repres	e address withing or of the person sent. At any tin	n twenty (20) da (s) making the r ne within the tw	ys after the filing of this equest; and, if you are an enty-five (25) day public
ECONOMIC IMPACT STATEMENT:					
X Economic Impact statement not requ	uired for this rule.	Concise summary of e	conomic imp	oact stateme	nt attached.
TEMPORARY RULES PRO		SED ACTION ON RULES	FINAL ACTION ON RULES		
Original filing Renewal of effectiveness To be in effect in days Effective date: Immediately upon filing Other (specify):	Repea Adopt Proposed fin 30 da		Date Proposed Rule Filed: Action taken: Adopted with no changes in text Adopted with changes Adopted by reference Withdrawn Repeal adopted as proposed Effective date: 30 days after filing Other (specify):		
Printed name and Title of person a Signature of person authorized to f		ules: Jane L. Mapp, Special			eral
orginataro or person authorizon to		WRITE BELOW THIS LINE			
		FICIAL FILING STAMP	OFFICIAL FILING STAMP		
,	M	EB 2 6 2014 ISSISSIPPI TARY OF STATE			
Accepted for filing by	Accepted fo	or filing by	Accepted for filing by		

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.